



## Multifamily Energy Efficiency Improvement Funding Application Form

**Note:** Information about the Maryland Multifamily Energy Efficiency Improvement Funding Rental Program can be found at

<http://dhcd.maryland.gov/HousingDevelopment/Pages/EnergyEfficiencyWeatherization.aspx>

Please consult the program information web link before completing this application form.

<b>Application must be completed in its entirety</b>		
<b>1. Contact Information for Person Completing this Application on Behalf of the Sponsor</b>		
Name:		
Telephone:	Cell Phone:	Title:
Email:		
<b>2. Information about the Sponsor</b>		
Legal Name of Sponsor :		
Legal Structure (check one): <input type="checkbox"/> For-Profit Corporation <input type="checkbox"/> Non Profit Corporation <input type="checkbox"/> Limited Partnership <input type="checkbox"/> General Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Other:		
Business Address:		
City:	State:	Zip:
Main Telephone:	Main Fax:	Website:
Total Number of Residential Units Under Management:	State of Incorporation/Partnership:	
Is the Sponsor or any of its officers involved in any regulatory proceedings or other legal action, including lawsuits, with the State of Maryland or any other entity involving the business? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, explain:		
Has the Sponsor or any of its officers been involved in bankruptcy or insolvency proceedings? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, explain:		

### 3. Information about the Property and the Property Owner

Property Name:

Property Address:

City:

State:

County:

ZIP Code:

**Property Owner:** Legal Name:

FEIN:

Legal Structure (check one):  For-Profit Corporation     Non Profit Corporation     Limited Partnership     General Partnership  
 Limited Liability Company     Sole Proprietorship Other:

Property Owner's Business Address :

City

State:

Zip:

Main Telephone:

Main Fax:

Website:

**Signature Block and Notice Address:**

**Property Information:**

Year Building Built:

Date of Last Major Rehab:

Rehab Planned Within Next Five Years?:  Yes  No

Number of Buildings: \_\_\_\_\_

Number of Residential Units: \_\_\_\_\_

Number of Residential Units by Type: SRO: \_\_\_\_\_ Studio : \_\_\_\_\_ 1 BR: \_\_\_\_\_ 2 BR: \_\_\_\_\_ 3 BR: \_\_\_\_\_  
4 BR: \_\_\_\_\_ Other: \_\_\_\_\_

Target Resident Population :  Elderly     Family     Disabled     Special Needs     Other:

Occupancy Restrictions of Project (show number of units): \_\_\_\_\_ Below 30 % AMI    \_\_\_\_\_ 31-40% AMI    \_\_\_\_\_ 41%-50% AMI  
\_\_\_\_\_ 51%-60% AMI    \_\_\_\_\_ 61-80% AMI

**Utility Provider:**

Electric \_\_\_\_\_ Account #: \_\_\_\_\_

Gas \_\_\_\_\_ Account #: \_\_\_\_\_

Oil \_\_\_\_\_ Account #: \_\_\_\_\_

Water \_\_\_\_\_ Account #: \_\_\_\_\_

**Meter Set up:**

- Master Metered
- Individual Metered
- Mix Metered
- Sub-Metered

**Responsibility for Energy Costs:**

Space Heating:     included in rent     Paid by tenants in separate utility accounts     Other: Explain

Air Conditioning:  included in rent     Paid by tenants in separate utility accounts     Other: Explain

Water Heating :     included in rent     Paid by tenants in separate utility accounts     Other: Explain

Electricity :         included in rent     Paid by tenants in separate utility accounts     Other: Explain

**Has the property previously participated in any utility programs (i.e. Quick Home Energy Check-up (QHEC), Smart Savers, Business Energy Solutions)?**

Yes     No    Name of program: \_\_\_\_\_    Date Work Completed: \_\_\_\_\_

Work completed under this program:

\_\_\_\_\_

#### 4. Certification, Authorization and Signature

The undersigned (the "Sponsor") hereby certifies, authorizes, and acknowledges:

1. That she or he has the legal authority to sign this application on behalf of the Sponsor.
2. That the information contained in this Application and the attached Exhibits is complete, true and correct.
3. That the Sponsor agrees to notify the Maryland Department of Housing and Community Development (the Department) promptly of any material changes to the Application and the attached Exhibits.
4. That the Sponsor has read the Application Instructions and understands that as part of the underwriting process, the Department may require the Sponsor to submit additional documents involving the creditworthiness of the Sponsor and the Property, the financing of the proposed project, and the energy analysis needed to support the estimates of the energy savings that will result from the proposed project, The Applicant agrees to submit these additional materials in a timely manner when requested.
5. The Department to make all inquiries it deems necessary to verify the accuracy of the Application and the attached Exhibits and to determine the Applicant's creditworthiness. The Applicant authorizes any individual, including the Sponsor's attorney and accountant, or any credit reporting agency, or any other entity, to furnish the Department with any information it possesses with respect to the Sponsor, the Property, this Application and the attached Exhibits.
6. The above named utility provider(s) to release energy use information (including the project name, address(s), account number(s), and use and consumption information) to DHCD, and DHCD authorized staff, contractors, and agents who require the information for confidential use in connection with calculating energy savings estimates and evaluating the effectiveness of the program. The authorization is valid for up to 3-years after the project is complete.
7. In the event the funding is provided as a loan, an additional fee may apply.

Certified and Agreed To this      day of      , 20\_\_\_\_.

\_\_\_\_\_  
Name:  
Title

NOTE:                      A complete energy funding application package consists of the following:

- **One electronic copy of the completed application form.**
- **Required exhibits**

Applicants should email the complete application package to :

Email: [MultifamilyEnergy.DHCD@Maryland.gov](mailto:MultifamilyEnergy.DHCD@Maryland.gov)

Attention: Turia Cook

Maryland Department of Housing and Community Development

7800 Harkins Road

Lanham, MD 20706

<b>Application Exhibits</b>	
1.	Proof of affordability
2.	Organizational Documents (for all entities)
3.	Copy of commercial electric and gas bill for all commercial utility accounts
<b>Exhibits Required Before Closing</b>	
4.	DHCD's MBE Form – forms can be located on the <a href="#">program website</a>
5.	Resolutions from Awardee (authorized to enter into the Grant Agreement on the terms & conditions required by DHCD). Please note that the resolutions are different depending on which type of entity is producing the document. Please send a drafted WORD document of these forms prior to execution for legal review- forms can be located on the program website
6.	Incumbency Certificate - forms can be located on the <a href="#">program website</a>
7.	Tenant Executed Customer Energy Usage <a href="#">Release Forms</a>
8.	Contractor Licenses for each contractor
9.	Permits or Certification that permits are not required
10.	Liability Insurance
11.	Property Insurance
12.	Certificate of Good Standing (must be dated within 30 days of the "closing" / execution of the loan/grant agreement)